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CASES OF ERYSIPELATOUS INFLAMMATION.

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[Communicated for the Boston Medical and Surgical Journal.]

In January, 1847, I communicated for the Boston Medical and Surgical Journal, a severe case of erysipelatous or cellular inflammation commencing in one finger, extending to the hand and arm, and attended with constitutional symptoms which proved obstinate and dangerous.

I stated that having constantly dressed the patient's hand, I contracted sores of a similar nature. These continued during the whole course of the patient's protracted illness, and gave me ample opportunity to experiment in my own person upon every variety of treatment. Since that time, I have met with many sporadic cases of greater or less severity.

Sydenham compared the pain of erysipelas to the stinging of bees. The cases I speak of, commence in a minute point, and are often at first attributed to the stinging of an insect, or, in females, to the prick of a fine needle. The attention is first called to the part by a stinging pain, and then a minute, almost invisible, point is observed. This point becomes surrounded by a scarlet elevation, and if punctured a minute ulcer appears, resembling a hole made in wax by the head of a pin. The pain increases, and soon becomes intolerable, especially at night, striking in, as it were, to the bone, and extending up the arm. The pain is so severe as to deprive the patient of sleep: and if he is able to keep about in the day, he is obliged to hold his hand with the finger pointing upward. If he allows it to hang down, the pain extends up the arm, producing nausea and fainting.

In my own case, I found that mercurial ointment, nitrate of silver, and every other application, aggravated the disease, with the exception of a simple bread and milk poultice, which it was necessary to continue during the whole course of cure.

In most of my patients the inflammation was confined to the part first attacked, forming an abscess slow of healing, and healing in concentric circles, leaving the skin rough, and the subjacent parts tender for a long time. I propose to relate one or two cases, which were to me of peculiar interest, though perhaps they may not be so to others.

Feb. 13th, 18—, about 9, P. M., I was requested to visit Mrs. —, a lady of advanced age, but vigorous constitution. She had felt a pain

in her finger some days previous, which she attributed to the prick of a needle. From this point the inflammation extended, had covered the hand, and was proceeding up the arm. There was severe pain in the finger. She had rapid pulse, coated tongue, nausea, pain in the back, in short all the marks of high inflammatory fever. I prescribed a pill of two grains of calomel, half a grain of opium, and one third of a grain of antimony; cold lotions to the hand and arm, and a dose of Epsom salts early in the morning.

The next morning, Feb. 14th, I found that she had rested quietly, and the febrile symptoms had entirely abated. It is probable that nervous excitement had increased the symptoms, which subsided upon relief of the pain. Finding that a disposition still existed in the disease to extend up the arm, I applied nitrate of silver to the inflamed part, and over about an inch of the sound skin; mercurial ointment to the finger, and a bread and milk poultice over the ointment. I also prescribed tr. sulphat. quinin. fifteen drops three times a-day.

The disease was now arrested. It extended no further, and the inflammation began to subside, retreating, and finally taking up its quarters in the finger first affected. For a day or two, severe pain was felt in the cauterized part, but after this she was free from suffering. On the 9th of March, I discontinued my visits, the patient being well with the exception of the finger, which continued to suppurate and was partially stiff at the joint.

The most remarkable feature in this case, was the rapidity with which the constitutional symptoms disappeared. The nitrate of silver was perfectly successful in limiting the extent of the inflammation. It does not appear whether the mercurial ointment was beneficial or not. I do not think that it was. With regard to poulticing, there is nothing more soothing or attended with better results. There is a prevailing notion, and one even laid down in surgical books, that cold applications are always necessary to promote resolution, and that warm poultices bring on suppuration. It is, however, a fact, which I formerly heard noticed by Dr. James Jackson, in his clinical lectures, that a poultice will favor whatever action the parts are disposed to take on. Applied very early, a warm poultice will promote resolution; a little later, it favors suppuration. In either case, it is attended with great relief of the pain.

Only one other serious case in the neighborhood, came within my knowledge at this time. This commenced on the 25th of January, about three weeks previous to the case just recorded, and in a different part of the village. I relate it here, in consequence of its occurring at the time, though of a very different character. One or two cases of typhoid, and reputed ship fevers, were prevailing about the time.

Jan. 25th.—A little girl, about 4 years of age, and previous good health, was suddenly attacked in the morning with vomiting. When I saw her, there was great heat of the surface, rapid pulse, lassitude, and other symptoms of fever. I prescribed an emetic, to be given immediately. In less than ten minutes after, I was sent for, and informed that she appeared to be dying. I found that, after taking the dose of ipecac., she had been seized with spasms, rigidity of the body, rolling of the eyes,

and dilatation of the pupils. I directed a warm bath and sinapisms, and administered fresh doses of the emetic, until they operated. She was very speedily relieved, the rigidity subsided, and there was no return of the paroxysm. She remained quiet the remainder of the day and night.

26th.—Pulse rapid but small, entire lassitude, skin pale. Her mother now informs me that she has found some inflammation about the vulva, which she attributes to having neglected to wash yesterday with cold water, the most scrupulous attention having always been paid to cleanliness.

27th.—Appears much as yesterday. I was now requested for the first time to look at the inflamed part, which had increased and become irritable, so that the mother was obliged to abandon the attempt to wash it. I found a dark red rash or blush extending irregularly from the vulva and spreading over the hips. I recommended merely the application of flour, and Dover's powders internally.

28th.—This morning I found the part less irritable, and the fever less. Appeared brighter than the day before. At noon, however, she became worse. There was occasionally some slight muttering and partial delirium. In the evening I found her crying out as with sharp pain. The pulse was feeble, there was considerable apparent prostration and great restlessness. The delirium increased so much that I was called to her in the night. I found the symptoms worse. She had slept none, the restlessness had increased, and she was tossing in the bed, talking constantly and incoherently. The extremities were cold, and the pulse that of low typhoid fever. I gave her a teaspoonful of wine, and of nitrous ether, every two hours, alternately. I had previously directed cold applications to the head, which were continued. The wine and nitre acted beneficially, and had a sedative effect; she became calm, and the skin of more equal temperature.

29th.—She is now quiet. Pulse small, rapid, compressible. Drowsy.

30th.—Lies very still; drowsiness continues. Can be roused without difficulty, but immediately relapses.

31st.—The inflammation has suddenly leaped to the face. There is swelling and a small red patch upon the end of the nose. It has left the labia, but still remains upon the hips, and has extended down one leg. There has been no pain or itching since the 28th. I now omitted the wine, and substituted tr. sulphat. quinin.

Feb. 1st.—The redness has extended over the nose, and there is a large patch of inflammation upon each side. Being costive, I prescribed a dose of calomel and rhubarb.

2d.—The medicine operated four or five times. This morning she appears brighter. The tip of the nose is now free from inflammation, which is extending up upon the forehead.

3d.—The redness and swelling continue to extend upward and backward upon the head. The whole lower part of the body is now covered with a light rose blush. The left foot has become slightly swollen. There is sordes upon the teeth. I applied mercurial ointment to the foot.

4th.—The eyelids are now much swollen. The nose is getting free from the rash. She still sleeps the most of the time.

7th.—She has continued nearly the same up to this time, drowsy and half conscious, but capable of being roused without difficulty. Does not answer questions. This morning appears better. Pulse fuller and less quick. Skin of good temperature. Discontinue the quinine.

About 3, P. M., a sudden alteration took place. She began to cry out, the eyes were rolled upwards, and the pupils very much dilated. The pulse was now full, strong and rapid. Great heat of the whole surface of the body.

Up to this time there seemed to be some little degree of uncertainty with regard to the disease. The symptoms were, as I have stated them, more those of typhoid fever than of inflammation, with the single exception of the absence of rose spots. There was tympanitis of the abdomen, through nearly the whole course of the disease, although the bowels were kept sufficiently free. There was at first no tendency to affect the cellular membrane. The inflammation was unattended with swelling until it reached the forehead about the 10th day. It was merely a rash or flush upon the surface of the skin, and extended so slowly that my attention was not called to it until the third day. It will also be observed that it was attended with comparatively little local pain or irritation.

On the 8th, I found her a little better, but the eyes remaining unnatural, and the case continuing critical; I requested consultation with Dr. Hosmer, of Watertown. His prognosis was favorable, and we agreed upon the application of leeches to the head, still continuing the cold water to the same part. The other remedies consisted simply of Dover's powder, spt. Mindereri, &c.

On the morning of the 9th I found her better. The leeches seemed to have a beneficial effect, and the eyes assumed a more natural appearance. The inflammation had now left the head and faded upon the body, but upon the right thigh it had become more deep-seated, and had affected the cellular membrane. The left foot remained swollen and painful. Upon this part I continued the application of the mercurial ointment. Since the alteration, or re-action, if it might be called so, the disease had assumed the decided form of a local disease with constitutional symptoms: in other words, of erysipelatous or cellular inflammation. Thenceforth, the progress was slow but favorable, though, every now and then, giving some threats of lighting up anew. In the foot, it remained nearly stationary, occasionally evincing signs of pointing, which would again disappear.

Shortly after this, the left knee became suddenly swollen, red and very painful. I immediately painted it over with solid nitrate of silver. The application was shortly succeeded by intense pain, which subsided and returned at intervals for several days. The inflammation did not extend upon the knee, but the slough formed by the nitrate became more and more elevated, and in the short space of four days was ready to separate, and a new skin appeared beneath, perfectly free from disease.

The affection in the foot now increased, pointed, and was opened by a lancet. I kept it poulticed a few days, and it healed up. The drow-

siness and unnatural appearance about the eyes went off slowly, so that for some time after the consultation, the parents felt a dread of dropsy of the brain. These symptoms disappeared, but she had now lost the power of walking, and was unwilling to make any attempt to bear her weight upon her feet. Her bodily health, however, was good, and singularly enough, from the time of the change which took place Feb. 7th, she had appeared to be gaining flesh and strength, even while lying nearly motionless, and at times suffering much pain; so that she had not now the appearance of a person who had been sick. She was prevailed upon gradually to put her feet to the ground, but the first efforts she made to walk were awkward and ludicrous. She gained steadily, though slowly, and soon became possessed of vigorous health. My last visit was made upon the 9th of March.

Upon reading the preceding case, some medical men would say that, upon the discovery of the local affection, mercurials should at once have been resorted to, and would have cut short the disease. Others, that the nitrate of silver would have checked its course and limited its duration. Others would prefer a preparation of iodine, whilst others would have advised more recently-discovered remedies. Many, on the contrary, would say that erysipelas was self-limited, and must be allowed to run its own course.

The answer is simply that a constitutional affection must be treated as such. If it assumes the form of typhoid fever, as such it should be treated, despite of age or of an attendant local affection; unless, indeed, the local affection assumes the preponderance. The application of mercurial ointment over any extent of surface is probably more objectionable in children than in adults, though it may not produce salivation. Nitrate of silver often produces great pain, and at any rate it is considered answerable for whatever pain is subsequently felt. A similar objection may be made to iodine. Nor, where there is much constitutional affection, can we expect much benefit from topical applications. It is, therefore, best to employ only such as are of the most soothing character. When the constitutional affection is checked, we may then with advantage resort to topical remedies.

I have given this case in detail, because I have rarely met with a similar one. In dispensary practice in Boston, cases of inflammation of the female genital organs in children are common, and sometimes take the erysipelatous form. These are easily accounted for by neglect, filth, and improper treatment. They yield readily to proper care and cleanliness. But, in the case recorded, the parents were of the higher class, and cleanliness had been carried to the greatest extent.

In a dissertation in 1838, I reported a severe case of erysipelatous inflammation of the genital organs, occurring in an elderly lady. In this, the local affection produced intolerable suffering, and it was almost equally impossible to make local applications, or to avoid it. A warm application which gave relief at one time, it was necessary to abandon for a cooling one; then nothing cool could be borne, and it was necessary to resume the warm one. The constitutional disorder was of course severe, but depended upon and was in subjection to the local one. I

have no doubt that the early application of the nitrate, would have been beneficial in this case, could she have been prevailed upon to submit to it. The affection finally terminated in cellular inflammation of one finger, the skin of which came off like the finger of a glove.

The most frequent cases I met with in Boston, from 1830 to 1840, were those of the head. I generally found my patient, at my first visit, with a face and whole head enormously swollen, unable to see, and suffering from intense pain. The constitutional symptoms were severe. These cases generally yielded to antiphlogistic treatment, salts, &c., and lotions of Cologne or spirits. They were sudden in their appearance, and of short duration. Cases of a different character, generally traumatic, occasionally appeared in the Massachusetts Hospital. In France, the hospitals then were, and probably are now, seldom free from it, which adds much to the mortality of the patients.

I will briefly describe one more case. A severe one of the kind I first mentioned, which is most frequent here, and similar to those which, as I stated, I had opportunity to observe on my own person.

A young man of about 16, applied to me in the latter part of November. A swelling had occurred upon the under side of the extremity of one thumb, the week previous. He had continued to work hard, and it had now become very painful. The skin of the thumb had become enormously thickened by hard work. I advised at first a bread and milk poultice, with mercurial ointment, salts and low diet. He kept out a few days longer, when he visited me again, and I applied nitrate of silver. It remained nearly stationary a few days longer, and then became intensely painful, the pain extending up the arm, and he was obliged to give up work. I opened the tumor, which contained matter, gave him a pill of opium, calomel and antimony, added laudanum to the poultice, and prescribed tr. sulphat. quinin. The pill produced perfect relief, and his bodily health improved greatly, under the use of the sulphate of quinine. The under side of the thumb remained stationary, and the inflammation showed no disposition to extend up the thumb; but a swelling was forming under the nail, which became intensely painful. He kept his bed for about five days, when the general symptoms had so far abated that he was able to leave his room. The inflammation proceeded in the cellular membrane, below the nail and skin, both of which finally separated and came off. At the root of the nail something appeared of a pea shape and size, and moveable. This gradually grew harder, and finally a similar membrane covered the place of the nail, extending from this substance and passing even over the end of the thumb. The thumb, though greatly emaciated, began to assume a natural appearance. The joint never became in the slightest degree stiff. The sulphate of quinine was abandoned without my knowledge, sooner than I intended, by which I think the cure was retarded. I continued to see him until the 23d of February, when the thumb was nearly healed.

It is well that in erysipelas or erysipelatous inflammation, we have a variety of remedies, for different cases even in the same individual require different treatment. In the early stage of local inflammation upon the finger, before suppuration has taken place, mercurial ointment ap-

pears useful. The affection will sometimes rapidly disappear under its use. When there is any disposition to spread, I have always found the nitrate of silver control it at once, and effectually. Quinine has always been beneficial. It seems, indeed, as if the patients could not get well without it, at least if the case is one of any duration.

Of course there are cases of robust, healthy persons who, by some means, become affected with erysipelas, and these cases yield readily to antiphlogistics; that is to say, to emetics, salts, and refrigerant or spirituous applications. I do not believe that we have any cases which demand the lancet, and I have not found benefit from leeches. Early incisions I have found to be injurious.

The nitrate of silver, therefore, as a topical application, and the sulphate of quinine internally, appear to me to be the most important remedies in erysipelatous inflammation. To this treatment may be added, a pill of calomel, opium and antimony, to relieve pain, promote a more healthy state of the system, and quiet irritation.

Newton Lower Falls, March 17, 1851.

ERUPTIONS OF THE SKIN DURING PREGNANCY.

[Read at the Quarterly Meeting of the Rhode Island Medical Society, by **DR. HIRAN ALLEN**, and communicated by the Publishing Committee.]

Two cases of disease of the skin have recently occurred in my practice, which were different from any cases which I now recollect of having witnessed before. The first case was a woman who was between eight and nine months advanced in pregnancy, and had been quite well during the whole time until a few days before I saw her. She complained of an excessive itching of the skin over the system, attended with a fine eruption, differing in appearance from ordinary eruptions. The elevations of the surface were fine, distinct, of a light brownish color. I prescribed some mild applications to allay the itching, but all were unavailing until her delivery, which revealed and removed the cause of her external disease. She was confined, as she supposed, a week before her time had expired, and was delivered of a stillborn child. From its appearance I should think the child had been dead three weeks; decomposition had begun to take place, and the skin had sloughed off in some places. From the symptoms, the mother supposed the child must have died about three weeks previous to its birth. The woman soon recovered, and all the eruption rapidly disappeared. The disease of the surface I suppose was the effect of nature's depurating process to rid the system of the intra-uterine poison, which had been absorbed.

I have had a similar case since. The woman had an itching and eruption of the skin, which appeared in many respects similar to the other case; but upon inquiry I found she felt active motion of the child. I concluded her child must be living, but the eruption indicated the reverse. At the time of birth I officiated. The woman had twins. One appeared to be well and healthy—the other, from its decomposed state, had probably been dead for several weeks.

MORPHINE IN STRANGULATED HERNIA.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I have recently met with several cases of strangulated hernia, where reduction was effected by morphine so speedily, with so little pain, and so satisfactorily to the patient, that I am induced to give your readers some brief notes of them from my note book.

In 1841, I published in the New York Medical Gazette several cases of the same nature, and since that time more than three fourths of the cases of strangulated hernia to which I have been called, were reduced by giving large doses of morphine. An old gentleman, aged 88, in December last was shovelling snow from the side-walk, and a hernia with which he had been affected many years became strangulated. He had been in the habit of returning it without difficulty, but this time he failed, and sent for a physician, who tried all the ordinary means, such as cold applied to the part, nauseating doses of tart. ant., the taxis, &c. &c. Several hours were spent in this manner, but without avail, and I was requested to see him. I found him with a large inguinal hernia, which was tense, tender, and very hard. In addition, he had hydrocele of both sides, which were of large size. A large dose of morphine was at once given him, with orders to repeat in an hour if perfect ease was not obtained. Two hours afterwards I saw him. His hips had been elevated according to orders; and I found him in a profound sleep, from which it was difficult to arouse him, yet his hernial tumor had gone back spontaneously, and the use of a truss has since kept it in its proper place.

A young man, 20 years of age, while lifting a heavy weight, felt something give way, and a tumor formed at the external orifice of the abdominal ring. It was very painful, tender and hard. A physician who saw him made use of the taxis, and persevered a long time, but to no purpose. He then gave him a dose of morphine, and advised to send for me. The anodyne which had been given procured some relief, but the taxis was of no avail, the parts being so tender and painful, that it was thought best to desist. A full dose of morphine was now administered, and directions given to elevate his legs and hips. He became easy in an hour and went to sleep. When he awoke, his troubles had ceased; the hernia had spontaneously returned.

Other cases might be recited, which I have seen, or that have occurred in the practice of my medical friends; and so striking has been the benefit of this practice, that, when called early, before inflammation and adhesions of the sac have taken place, I feel an almost certain confidence in its efficacy. The tedious routine of practice recommended by the books, I look upon as worse than useless, in comparison to this. Chloroform is a valuable agent, no doubt; but I have tried it only in two instances, and then with very little hope, as opium had been freely used, and adhesions to the sac were found so firm and extensive, that after the operation of cutting down and separating them, it was found difficult to return the bowel and omentum into the abdomen. I believe that there is scarcely a case of recent strangulation which may not be speedily and easily reduced by a judicious use of large doses of morphine. I

have performed but one operation for strangulated hernia, where this practice had been pursued, and failed, except where extensive adhesions existed to account for the failure. That case was one where a large quantity of feces had been enclosed in the strangulated portion, and also a knot of worms, rendering its return a matter of great difficulty, after I had performed the operation. There is nothing lost if you fail in this course. It gives the patient great ease and comfort, frequently stops the obstinate vomiting, and fits and prepares him for the operation, if that is finally to be performed. The *modus operandi* of the anodyne practice is clearly obvious. When a protrusion of the bowel takes place, pain and irritation at once supervene. Spasm is the next effect, and the opening is now much diminished. Inflammation next follows. Effusion of lymph, and a glueing of the protruded intestine or omentum, or both, to the sac, quickly follows, and prevents its return by taxis or by spontaneous effort. Morphine allays spasm, relaxes the muscles, and allows its return; or it prevents the recurrence of effusion by allaying irritation, and by that means prevents inflammation developing itself, as it would rapidly do were anodynes not exhibited. The practice is not novel, as many writers on surgery recommend opium in the catalogue of remedies for strangulated hernia. But no one, to my knowledge, has made it a prominent agent, but only as one of secondary importance. I view it as more efficient than all other remedies together, and as preferable because of the several indications it fulfils.

A. B. SHIPMAN.

Syracuse, N. Y., March 22, 1851.

THE LATE DR. JOSEPH TORREY.

[In the last number of the Journal, mention was made of a discourse by Rev. George T. Dole, occasioned by the death of the late Dr. Torrey, of Beverly. We now copy from it a portion of the sketch of Dr. T.'s life.]

JOSEPH TORREY was born on the 18th of March, 1768, in North Killingly, Windham Co., Conn. He was a descendant, in the fifth generation, from the Rev. Samuel Torrey, of Weymouth, Mass., a man of no small eminence in his day, who three times preached the election sermon, and who is said to have been offered the presidency of Harvard College. His grandfather and great grandfather were also clergymen, and both bore the name of Joseph. His father, also named Joseph, was a farmer in Killingly, and held honorable offices, both civil and ecclesiastical, in the community where he resided. His maternal ancestry were not less respectable, and also embraced a number of the clerical profession. The subject of this sketch was the sixth, and the last survivor, of seven children. Attacked, before he had completed the first year of his existence, by a common infantile disease, his constitution became permanently impaired. That misfortune, as doubtless it was regarded, disqualifying him for laborious pursuits, probably led, as he himself once intimated, to his turning his thoughts to professional life. He commenced a course of study, and acquired and always retained enough of Latin

and Greek to be of essential service to him in the technics of his profession. But the pecuniary embarrassments which so extensively ensued upon the war of the Revolution, prevented his receiving a collegiate education. This failure, in itself considered, seems matter of deep regret; for he manifestly possessed natural powers which needed but the discipline of a thorough college course, to have enabled him to shine among the lights of his age. Yet, if we may be allowed to speculate on the probable results of a change in past events, how doubtful whether a more useful or honorable career would, in fact, have been his, had his name found a place on the catalogue of Yale or of Harvard! How probable that a constitution like his would have utterly broken down under the toils and the confinement of a student's life! Those same untoward circumstances which disappointed his hopes of a liberal education, perchance gave to this community the services of a good physician, for half a century, in one who otherwise would have pined amid college walls, and filled an early grave.

Having acquired what was then deemed an adequate preliminary education, he pursued the study of medicine with a Dr. Ainsworth, of Pomfret. There were but three medical schools at that time in the country, and comparatively few resorted to them. When he had acquired so much of the Esculapian art as warranted him in commencing independent practice, he was advised to visit the town of Mansfield, Ct., and actually set out for that place, intending, should he find the prospect favorable, to establish himself there. On that journey an incident occurred which shows how trivial an event may change the whole course and complexion of a person's life. As he journeyed on horseback, a shoe became loosened or lost from his horse's foot, and stopping at a blacksmith's shop to have it replaced, he stepped into a public house, hard by, while it was done. There he found a man from the northern part of this County, who told him that there was an opening for a physician in Rowley, and gave so favorable a representation of the field that the doctor decided on the spot to go there, and not to Mansfield. Mounting again, he turned his horse homeward. His parents, surprised at his speedy return, soon fell in with his new design, and having made the necessary arrangements he set off for Massachusetts some time in the year 1793, with his saddle-bags, a small sum of money, an order for a few dollars worth of medicine on a Salem apothecary, and his father's blessing. He bore a letter of introduction to the Rev. Manasseh Cutler, LL.D., of Hamilton, who himself originated in Killingly. Dr. C. gave him a letter to the late Dr. Manning of Ipswich, who introduced him to the people of Rowley. And there he opened his office and found immediate employment.

Nor was it for this *location*, alone, so distant from the place of settlement which he had contemplated, that he was indebted to the incident of the horse-shoe. The learned Dr. Cutler had a daughter, with whom that letter of introduction made him acquainted, and to whom, about a year afterward, the young physician was united in marriage. The union thus formed, and continued much beyond the ordinary term of connubial life, was throughout eminently happy. And when that once-cherished

form had been for more than twelve years hidden in the grave, and he had reached an age when the flame of youthful affection seems, too often, to have become entirely quenched, he never alluded to her except in the most tenderly expressive terms. Two children were born to them while resident in Rowley—a daughter, who died in infancy, and a son, who in the fifth generation inherits, but as he is here present, I may not say how adorns, the scriptural and time-hallowed family name of Joseph.

A wider and more inviting field opening, Dr. Torrey removed to South Danvers in 1799. There he received a liberal patronage, from the first. But as he became better known, the public confidence, which has been said to be always “a plant of slow growth,” was constantly augmented, his practice increased, and became more lucrative with each succeeding year. One indication of the estimation in which he early began to be held in this region, is seen in the fact that he was selected, very soon after his removal to Danvers, in connection with several of the leading physicians of the county, for a rather unique and highly responsible professional duty in a neighboring town. The circumstances were these:—Jenner’s great discovery was beginning to be known, though comparatively little understood or applied, in this country. Dr. Story, of Marblehead, the father of the late Chief Justice, had sent to England for some of the vaccine virus. From a combination of circumstances, which I need not relate, a mistake was made, and plentiful supply of matter received which had been obtained from the arm of a man inoculated with *smallpox*. Dr. Story, nothing doubting, made free use of this matter among the families of Marblehead, and the necessary consequences soon appeared! The town authorities took vigorous measures for public safety. A *cordon sanitaire* was drawn around the place, and Drs. Treadwell of Salem, Gardiner of Lynn, Manning of Ipswich, and Torrey, were appointed to take up a temporary residence in Marblehead, as associates of Drs. Story and Drury, and carry the population through the distresses and the dangers of that dreadful disease. In the discharge of this, by no means enviable duty, Dr. T. was engaged many weeks, acquitting himself to the satisfaction of all, and receiving a liberal compensation for his services. Now, thanks to a merciful providence, such a visitation is no longer to be feared. And let it not be forgotten, that to a *physician* belongs the honor of a discovery that has stripped, what was once one of the direst scourges of humanity, of almost all its terrors.

About the year 1805, Dr. Torrey took up his residence just within the limits of Salem, and some ten years later removed to the central parts of that town, where his practice became as extensive as that of any physician in the place. While resident there he was several years chosen representative to the Massachusetts Legislature.

When about 40 years of age, Dr. Torrey ruptured a bloodvessel, and was for some time laid aside from his professional labors, with little hope of recovery. He at that time became the patient of the since celebrated Dr. Mussey, then resident in Salem. By the blessing of God, he was restored and spared for more than forty years more of active use-

fulness. This illness, and an occasional brief visit to his old home and friends in Connecticut, were almost the only interruptions of laborious professional duty for more than forty years.

In 1836, being nearly 70 years of age, he undertook a journey to Michigan, accompanied by his wife. On their return they took the home of their oldest son in their way, but his beloved companion was to accompany him in that journey—in the journey of *life*—no farther. The short sojourn in Michigan, instead of relieving, as had been hoped, greatly aggravated a chronic complaint under which Mrs. T. had labored. Intermittent fever also set in, and it was with great difficulty that she reached Burlington. There she lingered a few weeks, and died, and her remains now sleep in the cemetery of that beautiful town, overlooking the lake, as the spot where her partner's remains have just been deposited, looks out upon the dark blue sea. What matters it, if their souls be re-united? Alone and mourning, the bereaved husband returned to Salem, and there he continued to reside for a few months. But his home had lost its light and its joy. His children were all dispersed. Some of the infirmities of age were beginning to be felt, and he decided to remove to this town, where he took up his last earthly abode in the family of his son Augustus.

I need not say to *you*, that since his residence here, he has been ready to answer any call for professional service, to the full measure of his strength. Nor was it till within a few weeks of his decease, that his own long-gathering maladies compelled him to cease altogether from those valuable ministrations to the relief of others. Thus, it appears that he was in practice as a physician, for the remarkable term of about 60 years, and during two thirds of that time his field of professional duty was a wide one, and his labors arduous.

For months previous to his decease, a visibly increasing weakness and emaciation, and a laborious cough, had made it apparent that a slight blow from Death's iron mace would be sufficient to shiver the frail mortal fabric. And yet there was no very decided development of disease till some weeks since, when in connection with extreme weakness and difficulty of respiration, indications of dropsical affections appeared. From these combined causes, he suffered severe distress at times. Yet he had daily intervals of ease, and the last day or two of his life was almost wholly painless. He recognized his son, who arrived from Vermont on Monday evening, with evident pleasure, and though he could say but little, seemed to enjoy conversation and prayer. It was supposed then that he might survive several days. But next morning it was manifest that a decided change had come over him; though he was still able, feebly, to respond to the inquiries of his children, they felt that his end was at hand. He fell into a kind of slumber and lay quietly, with fainter and fainter respirations, till at half past 4, P. M., he ceased to breathe.

Thoroughly to analyze and exhibit Dr. Torrey's professional character, would require the hand of a brother. I shall not attempt it. But on the testimony of some of his brethren who knew him best, I may say, that he was philosophical, discriminating, and judicious in medical mat-

ters ; that he had an uncommon share of energy and perseverance, and what might, perhaps, be termed a happy audacity, which bore him successfully through many trying cases, from which men of less nerve would have shrunk. He did not profess an extensive acquaintance with surgery ; and yet in some surgical operations, particularly that for hernia, he was eminently successful. But, in all the ordinary range of a family physician's duties, he was skilful, it is believed, beyond the common standard ; and in one peculiarly delicate and difficult department, he had an expertness unrivalled in this region, probably unsurpassed in the Commonwealth.

While he thus rendered large service to humanity, directly as a practitioner, he did something in a more general way for the cause of medical science. He contributed some valuable papers to the *New England Medical Journal*. And there is reason to believe that it was he who first suggested the idea of organizing the Massachusetts Medical Society on its present basis, though Dr. Treadwell was the principal conspicuous agent in effecting the object.

" VIOIOUS ADVERTISEMENTS."

[THE following, from an article in the *London Lancet*, relates to a nuisance which exists in this country as well as in England. We shall watch with interest the success of the plan here proposed for the amelioration of the evil.]

We rejoice to see that a Society has at length been formed called the "Union for the Discouragement of Vicious Advertisements," whose operations are directed against that filthy form of quackery and swindling we were the first to denounce and expose. Much good must result from the direction of the lay public to this form of moral contamination. The address of the new Society, which lies before us, shows that its originators are perfectly conversant with the tricks of the fellows they design to unmask. Of the malady which rages throughout the vile brood of obscene publications, the prospectus of the "Union" is perfectly right in stating—"That the actual existence of this infirmity (impotence) is most rare ; medical men scarcely ever meet with it, and when they do, it has not its origin in youthful errors, as insinuated, but they state that patients *whose minds* are unhinged by the horrible idea of being thus afflicted, come before them daily." This idea is wholly due to the pernicious familiarity of their minds with the titles of infamous books.

The prospectus of the "Union" contains a calculation of the amount expended in advertising three of these obscenities in "sealed envelopes." Taking only three of the books, it is computed that—

3 advertisements in 9 daily papers cost at least	£3780 per annum.
Ditto in 20 weekly do.	1400 "
Ditto in 220 provincial weeklies,	15400 "
	<hr/> £20,580 !

We learn from the same source that the country newspaper proprietors

allow the vagabond class alluded to "to enter into contracts for the insertion of their notices;" and we regret to find, that out of all the provincial papers, not more than twenty at most exclude their advertisements. We can only say that, in our opinion, the keeping of infamous houses is quite as respectable a mode of subsistence as that of living by the produce of these infamous advertisements.

But the cost of advertisements is only one of the items of expense incurred by these odious "firms." Rents, printing, book-binding, postage, agencies, &c., must make up an equally large sum. In our remoter colonies, Calcutta and Sydney, these moral pestilences are found in full vigor. The incomes must be immense to support such expenses, which not only admit of such constant and gigantic outlay, but of large accumulations of wealth. Not long since, a member of one of the vile firms turned up as one of the largest proprietors in a great railway. Every day, during the London season, three or four gaudy carriages in the style of blue bodies and yellow wheels, and with horses, coachmen and footmen to match, may be seen flaring in the ring in Hyde-park, containing the wives or women of these wretches, and sometimes the quacks themselves, hook-nosed, black-locked, and over-done in jewellery and dress of the most extravagant fashion. These quacks and their progeny are capered along more noisily than my lord duke or marquis. But it is not only in the drive that these harpies and the aristocrats are seen together; we have lately ascertained that some of the most notorious hells in St. James's are presided over by these fellows, who follow the business of "balms" and "elixirs" by day, and dice by night.

The circular of the "Union" sets forth a fact relating to the habits of these vermin with which we were well acquainted, but which it may not be out of place to repeat:—

"Some may suppose that a large concourse of patients are attracted to their houses, whose payments might compensate for losses in advertising. Such, however, is not the case. Their doors have been watched. Few go in or out. There is none of that crowd which is a morning nuisance to the neighbors of a successful medical man; but the postman delivers, almost hourly, large packets of letters, containing some, perhaps, money, but most, apparently, the postage-stamps, which, the advertisements inform us, may be sent to pay for the books."

We are told in the advertisements, that "Manhood" is being translated into five "languages," so that its authors are not content with the field afforded by the mother-country and her forty colonies, but must needs endeavor to indoctrinate other countries with their abominations.

There is, then, ample scope and verge for the new society, which, if it but abate this evil, will do society as great a service as that rendered by a Howard or a Wilberforce. The following quotation will show the plan proposed by the Society at the present time, but no doubt it is intended to extend its operations to more positive measures. After exhorting every reader of a newspaper inserting these advertisements to address a protest to the editor, and dwelling upon the force of public opinion, the circular proceeds:—

"By simply sending your name to be enrolled in the Union now

forming for the Discouragement of Vicious Advertisements, you will, with no expenditure of money beyond a postage-stamp, and little more than a stroke of your pen, assist materially with your influence and sympathy a good cause. You pledge yourselves to no test by so doing; you simply give encouragement to those who are laboring with this object, by declaring your intention to check a great moral evil, and remove from England this foul blot. The expression of your wish will work its own accomplishment."

The letters are to be addressed to "J. Harrison, New Inn, Strand, Hon. Secretary to the Union for the Discouragement of Vicious Advertisements." If such a Society really exist, and is prepared to proceed in the good work impressed upon its name and title, we can promise it the hearty and energetic co-operation of the profession.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, APRIL 2, 1851.

Planetary and Celestial Influence in producing Epidemics.—In the New York Mirror we find quite a long letter from Dr. Bowran, to Prof. J. M. Smith, on the subject of planetary and celestial influences in the production of epidemics. How far Dr. Bowran may be correct in his theories, we are not able to decide, but would recommend his letter to all those who may feel the least interest in the matter. The following paragraphs we clip from it, as containing a fair sample of the author's views. He says,

"Every function of the living body is simply a chemical operation, the effect of magnetic polarity. Digestion is altogether a chemical process, by which the aliment taken into the stomach is broken down, and a new formative arrangement or a separation of the nutritious matter is effected. Respiration of atmospheric air by the lungs, is only a chemical phenomenon, by which oxygen is introduced into the circulatory system of the arteries and veins, and thus becomes commingled with every atom of the animal body. The circulation of the blood through the heart and arteries, is effected entirely by magnetic polarity. The planetary bodies of our system are not more certainly carried around the sun in their revolving course by the power of magnetic gravitation, than the blood of the human system is moved in its tidal, wavy circuit around the body, by the same attractive influence. Indeed, every function of the body is simply a chemical phenomenon, altogether dependent upon the power of magnetism for its performance.

"The powerful effect of celestial influences upon organic life and disease, may be shown by the ever changing forms and degrees of intensity manifested by the same complaints at different periods. We will take for illustration, scarlatina. Every one in the least conversant with this form of disease, is aware that at one time it will assume the mildest aspect, and pass through its development in the human system with scarcely any derangement of the functions of life. At other times the contagious poison will almost immediately strike down its victims with sudden and inevitable death. The same facts are witnessed with regard to the contagious typhus, smallpox, and other contagious complaints. It must be apparent to every

one that these changes in the character of the same disease at different seasons, must require different plans of treatment. And the practitioner who regulates his treatment to suit the ever changing forms and types of disease, is governed by principles of sound natural philosophy; and he who attempts to treat the same disease alike at all times, is emphatically an empiric."

Pepper and its Adulterations.—One would hardly suppose, from the comparative cheapness of this condiment, that there would be any occasion for adulterating it. Yet it has been proved, by the analysis of the commissioners before alluded to, that more than half the pepper which is sold in a ground state is adulterated. The substances most commonly used for the purpose are *burnt crusts of bread, husks of mustard, pepper dust, the sweepings of warehouses, oil cake, linseed meal, sago, wheat and pea flour*. In 43 samples that were examined, all of which were sold as pure pepper, more than half were adulterated with the substances above mentioned, in various proportions. In this country, black pepper is adulterated with *rye flour, sand, and common cheap gingers*. It is often the case, that the powdered spices are sold for a less sum than the crude can be purchased, which finds a ready explanation in the fact of the ground material being extensively mixed with other cheap substances. The only sure way of getting our spices, &c., good and pure, is to obtain them in their crude state, and powder them as wanted for use.

Resignation of Dr. George Hayward.—It is understood that Dr. George Hayward has tendered his resignation, as surgeon to the Massachusetts General Hospital, to the Board of Trustees; but whether it has been accepted by them, we have not learned. Dr. Hayward has long been connected with the surgical staff of the Hospital; a post that he has most honorably and acceptably filled, and his counsel and valuable aid will be sensibly missed. It is with extreme regret that we chronicle the intelligence of his resignation.

Suffolk District Medical Society—Dr. Parkman's Address.—The annual address before the Suffolk District Medical Society was delivered on Friday evening last, by Dr. Samuel Parkman. We regret that the hall was not better filled; there having been but few present except members of the profession. The address was exceedingly interesting, and the theme well chosen. It was written with great care, and most happily delivered, and, from the marked attention of the audience, we should judge all were pleased with it. It was our intention to give a synopsis of it, but the Society having voted to request a copy for publication, we shall defer a more particular notice till it is published.

Massachusetts Medical Society—Annual Meeting.—MR. EDITOR,—I understand that it is the intention of "the Committee of Arrangements" and of the "Committee for the procuring of Scientific Papers" to offer great attractions at the next annual gathering of our venerable Society. Rooms will be provided for the reading of medical and surgical papers, cases, &c., and opportunity offered for discussions thereupon. An exhibition of various

new surgical instruments, articles of materia medica, &c., will be prepared. As the papers, of which already a number have been promised, will occupy much time, it is proposed that all scientific meetings should be held in a different room from that at which the executive doings of the Society, *such as the annual alteration of by-laws, expulsion of members, &c.*, are transacted. All tastes will be, in this manner, consulted. Those who choose to discuss the well-worn theme of by-laws, may have their time; whilst those of us who think that the present by-laws are sufficiently good, will spend their hours elsewhere. For my own part, I hope that for at least the next five years every proposition to alter a by-law may be indefinitely postponed. However, it remains to be seen whether we shall continue in the old routine, or strike out a new path, and make the meetings really valuable to all concerned, by their elevated tone, both at our scientific and social gatherings. It is hoped that there will be a good representation from the east and from the west, to meet at the heart of the Commonwealth, and that next year we shall go farther west, to Springfield or Northampton.

Remuneration of Medical Attendants in France.—M. Amedee Latour, editor of *L'Union Médicale*, has lately published a very instructive article on the above subject. From this contribution we find that the majority of medical men, especially in the country, are lamentably paid, the principal cause of this sad state of things being the unfortunate practice of underselling one another. There are surgeons in the country who will pay a visit for five pence, and even two pence half-penny; attend a midwifery case for twenty pence or half a crown; set a limb for ten pence, &c. &c. In Paris the evil is likewise very great, it being well known that some unscrupulous characters offer their services underhand at a lower rate than the usual attendant has fixed, that rate being indeed low enough, as it ranges from twenty pence to half a crown a visit, even in Paris.

At Toulouse a club was formed some time ago, composed of a thousand individuals, who offered a surgeon one thousand francs (£40) a year to attend all the members. He, being a beginner, accepted these miserable terms; seeing which, a professional BROTHER went and offered his services for half the sum. But the latter was soon outwitted, as a third sprang up and offered to do the work for £10 a year! M. Latour throws out the idea that a minimum should be fixed and agreed upon in each locality; but we fear that he did not consider human frailty sufficiently when he thought of that expedient.—*Lancet*.

Inunction in Scarlatina.—It will be recollected that Dr. Lindsly, of Washington, published in this Journal, last year, some account of his successful treatment of scarlet fever by the use of bacon, externally applied by rubbing. Dr. D. J. Cain, of Charleston, S. C., adds his testimony to that of others, in regard to the beneficial influence of oil or animal fat, which was first recommended by Dr. Schneeman. Dr. Cain says, in the *Charleston Medical Journal*, of which he is one of the editors—

"I have employed it, [inunction], recently in three cases of scarlatina—two uncomplicated, the third accompanied by strongly marked typhoid symptoms—with apparently happy results. I say *apparently*, because it would be premature to draw any deduction from its use in so small a number of cases." "In the three cases, there was a more rapid reduction in

the force and frequency of the circulation, and, *pari passu*, with it modification of the burning heat of the skin, than in cases treated in the ordinary way; the abatement in the febrile phenomena being attended by a sensation of comfort. Indeed, in one case, so great was the relief from the parched heat afforded by the inunction, that the patient, a black boy, begged his father to rub him once or twice every night, that is to say, between the time of the last rubbing prescribed at night (9 o'clock), and the first rubbing in the morning. All expressed themselves as not being in the slightest degree incommoded by the heat of the skin, if the intervals between the rubbing was not too long. A happy effect was produced upon the skin; its temperature, after two days' use of the lard or sweet oil, was very pleasant to the hand of the observer. In all it was rendered soft and velvety (even in that of the negro); and in one of the cases, a lad about 17 years old, at the Marine Hospital, a very abundant crop of miliary vesicles (sudamina) made its appearance on the second day of the rubbing, covering him from head to foot, which symptom I considered as denoting the free action going on in the skin, as proving that its pores were completely opened.

"In none of the three patients was there discharge from the ear, abscess, diarrhœa, dysentery, or dropsical swelling. In two, the urine was only moderately red, and soon became clear; in the third, it retained its ordinary pale color. Desquamation was so slight, that it did not amount to more than a slight furfuraceous exfoliation.

"The fat or oil (for I have used both animal and vegetable), seems to me to exert a powerfully sedative influence primarily on the cutaneous surface, relaxing its textures, opening its pores, and subduing phlogosis; thus restoring the function to this important organ, the interruption to which is, in my humble opinion, the source of the formidable train of sequelæ, so often noticed, such as congestion of the kidneys, accompanied by albuminous urine, and giving rise to dropsical collections; that of the bowels causing diarrhœa, dysentery, &c.; the susceptibility to atmospheric vicissitudes, the formation of abscesses, &c. The secondary effect is on the nervous system, allaying the high excitement induced in it by the cutaneous inflammation, &c.

"It is understood that I am only speaking of inunction as, at best, the base of the treatment; other means must not be omitted; especially in scarlatina maligna, as every physician is aware, must the powers of the system be kept up by tonics, stimulants, &c.

Winnebago County (Ill.) Medical Society.—At a meeting of the Physicians and Surgeons of this County, at Rockford, on the 30th day of January, 1851, pursuant to former notice, it was resolved to form a County Medical Society. After the appointment and report of a committee, a constitution, by-laws, and code of medical ethics were adopted. The Society is to be called the "Winnebago County Medical Society." The officers are a President, two Vice Presidents, Secretary, Treasurer, and a Board of Censors.

It is made auxiliary to the State Medical Society, of this State. It is to hold its annual meetings at Rockford, on the first Tuesdays of April of each year, and quarterly meetings on the first Tuesday of July, October and January, at a place to be chosen at the previous meeting, at which meetings physicians of other counties are invited to be present. Two members of the Society are appointed at each meeting to deliver dissertations

at the next meeting; the persons appointed, and the subject chosen, by the President. Dr. Andrews was appointed to speak on typhoid fever, and Dr. Ames on contagion. The President is also to deliver an address at each annual meeting.

The officers elected were as follows:—Dr. Wm. Lyman, President; Drs. Lucius Clark and A. E. Ames, Vice Presidents; Dr. J. Blount, Secretary; Dr. N. S. Andrews, Treasurer; and Drs. Charles Richings, G. P. Ranson, and S. Clark, the Board of Censors. Adjourned till the first day of April, at Rockford, Ill.—*North-Western Med. and Surg. Journal.*

Charitable Bequests.—On another page of to-day's Journal will be found an account of the munificent bequests of the late Dr. Howe, of Billerica. The following similar act, though not by a medical man, may be appropriately recorded in our pages, on account of a deserving medical institution being made a recipient of part of the testator's bounty. The account is taken from the Boston Transcript. The frequent occurrence, of late, of such instances of liberality, is creditable to our country and to our race:—

"We learn from the Post, that Abiel Chandler, late of the firm of Chandler, Howard, & Co., who died on the 22d inst., at Walpole, N. H., has left by will \$50,000 to Dartmouth College, to establish a school of instruction in the practical and useful arts of life. He constitutes a board of visitors, consisting of two persons, who shall hold office during life; and he appoints his executors, Jon J. Dixwell and Francis B. Hayes, Esqs. of Boston, the first board of visitors, with the power of appointing their successors. He has also given \$1600 to the New Hampshire Asylum for the Insane, and made many devises and bequests to his relatives and friends. The New Hampshire Asylum for the Insane is made residuary legatee. Mr. C. was a native of Concord, N. H."

Medical Miscellany.—McFadden, the Philadelphia druggist, convicted of manslaughter by causing the death of a young woman by administering morphine through a mistake, has been sentenced to three months imprisonment in the penitentiary.—We learn, says the Medical Examiner, that Prof. Horner, of the University of Pa., has, in a recent dissection, distinctly seen the *Pleuro-Œsophageal* and *Broncho-Œsophageal Muscles*, as described by Prof. Hyrtl, of Vienna.

TO CORRESPONDENTS.—Dr. Stillwell's paper on Tetanus, and Dr. Cleveland's on Amenorrhœa, have been received.

MARRIED.—In Brooklyn, N. Y., Dr. E. H. Dixon, of this city, to Mrs. S. W. Seaver, of Brooklyn.

DIED.—In Benicia, Dr. Hammond, of the United States Army.—In Binghamton, N. Y., Dr. Eliza Ely, 70 years of age.—In Seabrook, N. H., Dr. Edward Dearborn, 75 years. He has left \$3,000 for a Female Seminary at S., and \$4,000 for the Congregational Society.

Deaths in Boston—for the week ending Saturday noon, March 29, 74.—Males, 33—females, 41. Accidental, 3—anaemia, 1—disease of the bowels, 1—inflammation of the bowels, 4—disease of the brain, 2—consumption, 7—convulsions, 4—croup, 1—debility, 2—dysentery, 2—dropsy, 1—dropsy of the brain, 5—erysipelas, 1—typhus fever, 2—lung fever, 4—rheumatic fever, 1—disease of the heart, 3—hemorrhage, 2—infantile, 6—disease of the liver, 1—measles, 7—old age, 3—pleurisy, 1—periperal, 3—smallpox, 2—disease of the spine, 1—unknown, 1.

Under 5 years, 36—between 5 and 20 years, 6—between 20 and 40 years, 19—between 40 and 60 years, 5—over 60 years, 8. Americans, 31; foreigners and children of foreigners, 43.

The above includes 7 deaths at the City Institutions.

Sale of the Chemical Apparatus belonging to the late Prof. Webster.—The various appliances of the late Prof. Webster's laboratory were sold at auction last week, by Mr. Leonard, Tremont Row. The most notable article in the collection was a *Magnet* once owned by the distinguished French chemist, Lavoisier, who, it is well known, was beheaded during the great French Revolution. After various fortunes it came into the possession of Prof. Webster, by whom it was highly prized. It seems to have been owned by men who have met with a most unfortunate end. It was purchased by Mr. Francis Alger, of South Boston, for the trifling sum of \$5 25. Its rare history gives it a value entirely beyond any intrinsic virtue. At the auction of Professor Webster's Library, previous to the above, his name was erased from all the books *except one*, and which book is now in the possession of a well-known literary gentleman of this city, who has one of the largest collections of autographs of any person in the country. This book contains the Professor's signature, written in a bold and dashing manner. It escaped the detection of the family, by one of the leaves adhering to the cover.

Tooth-Pulling Illustrated.—Before the days of chloroform and ether, there was a quack who advertised tooth-drawing without pain. The patient was placed in a chair, and the instrument applied to his tooth with a wrench, followed by a roar from the unpleasantly surprised sufferer. "Stop," cried the dentist, "compose yourself. I told you I would give you no pain, but I only just gave you that twinge as a specimen to show you Cartright's method of operating." Again the instrument was applied, another tug, another roar. "Now don't be impatient, that is Dumerge's way; be seated and calm, you will now be sensible of the superiority of my method." Another application, another tug, another roar. "Now pray be quiet, that is Parkinson's mode, and you don't like it, and no wonder." By this time the tooth hung by a *thread*; and whipping it out, the operator exultingly exclaimed, "That is my mode of tooth-drawing without pain, and you are now enabled to compare it with the operations of Cartright, Dumerge and Parkinson."

Munificent Donations of the late Dr. Zadoc Howe, of Billerica.—We learn from the *Courier*, that the late Dr. Zadoc Howe, of Billerica, who died on the 5th ult., at an advanced age, by his will, after making various donations to his family and friends—giving \$3,000 to the Bible Society, &c.—left the remainder of his property to be applied for the purpose of erecting and forever maintaining a high school for the youth of Billerica and its neighborhood. During his life, he had purchased a beautiful site in the centre of the town, which he handsomely enclosed and crisscrossed with trees, and now he has directed that the school-house shall be placed upon it, at an expense not exceeding \$8,000. He names as the trustees of the school, four Unitarians, one Orthodox Congregationalist, one Baptist, and one Universalist. Dr. Howe was a distinguished physician, and President of the Massachusetts Medical Society; was universally respected by all who knew him, and the good name which he acquired during his life will be forever perpetuated, through his judicious and valuable bequest to his townsmen and neighbors. Dr. Howe was an occasional contributor to this Journal, and a subscriber from "the beginning."